



Population Healthcare Analysis

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HEALTHCARE



THOMSON REUTERS

Introduction

- Thomson Reuters met with project sponsors to plan a descriptive population healthcare analysis.
- Blue Shield of California, Anthem Blue Cross, Medco, Kaiser Permanente and Thomson Reuters serve as joint sponsors.
- The study will leverage the CalPERS Health Care Decision Support System data, embedded methods, and tools.
- The study will be completed in six months and the results will be presented to the CalPERS Health Benefits Committee.



Study Objectives

- Profile CalPERS Basic population's healthcare utilization, including regional profile*
- Compare to cost and utilization norms and identify possible areas for improvement
- Identify opportunities to reduce unwarranted variability in costs and utilization among geographic regions

* geographic regions: Los Angeles, Other Southern CA, Bay Area/Sacramento, and Other Northern CA



Approach

- Step 1: Population Health Profile
 - Describe overall healthcare utilization, regional differences, and comparison to external norms
- Step 2: Member Stratification
 - Describe the distribution of members by level of risk and associated costs; compare health risk patterns to external norms
- Step 3: Population Segment Analysis
 - Identify the specific clinical conditions most responsible for the cost for high risk members
- Step 4: Disease Profiles
 - Compare cost and utilization patterns to external norms and among regions for the “Top 5” specific conditions identified in Step 3



Disease Profiles

For each of the Top 5 selected clinical conditions, the analysis will include:

- Analysis of Cost Driver
- Profile of Utilization Patterns
- Clinical Analysis*:
 - disease severity distribution
 - Important comorbidities
 - prescription drug utilization
 - regional variations in treatment
 - adherence to evidence-based standards
 - preference-sensitive treatments

* Actual clinical analysis will be determined and conducted as appropriate for each selected disease; the analysis may include listed components and may include other components as appropriate for each disease.



Adherence with Evidence-Based Standards of Care

- If any of the “Top 5” conditions fall into one of the categories listed below, the disease profile will compare regional rates of adherence with nationally endorsed evidence-based care standards
 - Coronary Artery Disease
 - Heart Failure
 - Asthma
 - Diabetes
 - Cervical, Breast or Colorectal Cancer



Example Measures of Evidence-Based Medicine: Annual Diabetes Care

- Hemoglobin A1C lab test
- Annual lipid level lab test
- Annual eye exam
- Annual microalbumin lab test for possible nephropathy



Preference-Sensitive Surgical Procedures

- If any of the “Top 5” conditions fall into one of the categories listed below, the disease profile will compare regional costs and utilization rates
 - Low-back pain (**MRI and surgery**)
 - Stable Angina Pectoris (**Angioplasty**)
 - Benign prostate Hyperplasia (**Prostatectomy**)
 - Cholecystitis (**Cholecystectomy**)
 - Otitis Media (**Ear Tubes**)
 - Osteoarthritis (**Hip and Knee Replacement**)
 - Fibroid Tumors (**Hysterectomy**)



Project Timeline

<u>Project Task</u>	<u>Start</u>	<u>End</u>
Conduct Analysis Steps 1 - 3	23-Mar-09	8-May-09
Review with project sponsors.	11-May-09	15-May-09
Conduct Disease Profile Analysis	18-May-09	31-Jul-09
Review with project sponsors.	3-Aug-09	7-Aug-09
Develop Study Findings Report	3-Aug-09	21-Aug-09
Review Report with project sponsors.	24-Aug-09	28-Aug-09
Prepare Final Report and Presentation.	31-Aug-09	10-Sep-09
Submit Final Report to project sponsors	10-Sep-09	10-Sep-09
Present to CalPERS HBC		Oct-09

